

**CITY OF SIMI VALLEY**  
**Sanitation Services Division**  
**2929 Tapo Canyon Rd, Simi Valley CA 93063**  
**(805) 583-6440**

**SPECIAL WASTEWATER DISCHARGE PERMIT APPLICATION**

- Temporary Discharger      Date From: \_\_\_\_\_ To: \_\_\_\_\_
- Out of City Discharger
- Water Softener Permit
- Groundwater Reclamation Project
- Groundwater Discharge to Sewer System
  - No treatment required
  - Pretreatment required
- Other: \_\_\_\_\_

1. Applicant Name: \_\_\_\_\_

2. Site Address: \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

4. Contact Name: \_\_\_\_\_

5. Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

6. Estimated Average Daily Flow (gallons per day): \_\_\_\_\_

7. Estimated Peak Flow (gallons per day): \_\_\_\_\_

8. Wastewater Characteristics:

- |  |                                    |  |
|--|------------------------------------|--|
| <input type="checkbox"/> PH High               | <input type="checkbox"/> Biocide   | <input type="checkbox"/> High BOD/COD  |
| <input type="checkbox"/> PH Low                | <input type="checkbox"/> Solvents  | <input type="checkbox"/> Sulfates      |
| <input type="checkbox"/> TDS                   | <input type="checkbox"/> Toxics    | <input type="checkbox"/> Oil/Grease    |
| <input type="checkbox"/> Chlorides             | <input type="checkbox"/> Flammable | <input type="checkbox"/> Septic Wastes |
| <input type="checkbox"/> High Suspended Solids | <input type="checkbox"/> Metals    | <input type="checkbox"/> Surfactants   |
| <input type="checkbox"/> Other (Explain) _____ |                                    |  |

9. Describe any pretreatment process or monitoring equipment proposed to remove or control pollutants: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. What Federal Categorical Standards apply to this discharge (if any): \_\_\_\_\_

\_\_\_\_\_

11. If there are any wastestreams from a manufacturing process you may not qualify for a temporary/special permit. Describe these wastestreams, if present: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
12. If this is a hazardous waste clean-up site, identify all potential contaminants: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

By signing this application, the applicant certifies the above information is true and correct. Should the City issue a Wastewater Discharge Permit to the applicant, the applicant agrees to abide by all the rules and regulations as set forth in City Ordinance 1170 and any special conditions included in their Permit.

- Fees for Special Permits are based on the type, strength, and volume of water to be discharged to the City sewer system.
- Disposal fees are based on the current Schedule of Sanitation Fees and Charges.
- Surcharges, based upon analytical results, may apply.

Completed by (Please Print): \_\_\_\_\_  
 Title: \_\_\_\_\_ Date: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Phone: \_\_\_\_\_

**Other information required (attach if checked):**

- Material Safety Data Sheets (MSDS)
- Incoming Water Meter Location and Readings
- Effluent Flow Meter Specifications
- Toxic/Flammable Gas Monitoring and Diversion Structure
- Spill Prevention Control and Slug Control Plan
- Toxic Organic Management Plan
- Blueprints, Plans, or Sketch of Facility Showing any Waste Generating Processes and Equipment Specifications, Pretreatment/Monitoring Equipment, Sampling Locations, Flow Chart, and/or the Discharge Connection to the City Sewer.
- Analytical Data/History of Proposed Water